

Application Data Sheet

APPLICATION INFORMATION

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable From (CRF)?:: No

Number of Copies of CRF::

Title:: SYSTEM AND METHOD OF PROVIDING MULTIPLE
INSTALLATION ACTIONS

Attorney Docket Number:: 227029

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 6

Total Drawing Sheets:: 14

Small Entity?:: No

Latin Name::

Variety denomination name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jeff
Middle Name:: A.
Family Name:: Zimniewicz
Name Suffix::
City of Residence:: Bellevue
State or Prov. of Residence:: WA
Country of Residence:: US
Street of mailing address:: 17035 NE 28th Place

City of mailing address:: Bellevue
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98008
Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Phillip
Middle Name:: J.
Family Name:: Marino
Name Suffix::
City of Residence:: Dublin
State or Prov. of Residence:: OH
Country of Residence:: US
Street of mailing address:: 7117 Starkeys Court

City of mailing address:: Dublin
State or Province of mailing address:: OH
Country of mailing address:: US
Postal or Zip Code of mailing address:: 43017
Inventor Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Crista
Middle Name::
Family Name:: Johnson
Name Suffix::
City of Residence:: Seattle
State or Prov. of Residence:: WA
Country of Residence:: US
Street of mailing address:: 915 20th Avenue E

City of mailing address:: Seattle
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98112

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 38887
Phone:: (312) 616-5600
Fax:: (312) 616-5700

REPRESENTATIVE INFORMATION

Representative Customer Number:: 38887

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/565,927	5/5/00

ASSIGNEE INFORMATION

Assignee name:: Microsoft Corporation
Street of mailing address:: One Microsoft Way
City of mailing address:: Redmond
State or Province of
mailing address:: WA
Country of mailing
address:: US
Postal or Zip Code of
mailing address:: 98052